Choosing a dressing
Wound management

Dressings should:

• maintain a moist wound-healing environment
  (except *dry gangrene or eschar is best left dry)
• manage wound exudate and protect peri-ulcer skin
• remain in place and minimise shear, friction, skin irritation
• be non-adherent to reduce trauma on removal
• be able to be changed once /day or less often when possible
Dressings

- Alginates
- Hydrofibres
- Foams
- Hydrocolloids
- Hydrogels
- Low adherent
- Paraffin impregnated gauze
- Semi-permeable films
- Silicones
- Iodine
- Silver
- Honey
Dressing Choice

• Aetiology

• Characteristics of the wound
  o Tissue type
  o Shape
  o Exudate
  o Pain
  o Signs of infection?

• Factors affecting wound healing

• Cost-effectiveness
Holistic and Patient Focused

- “whole” not “hole”
- individual risk factors
- individual circumstances
Before applying any dressing ask...

- What is the action of the dressing?
- When should it be used?
- What are the limitations/contraindications to its use?
- Do I know the correct method of application and removal?
- Do I have sufficient knowledge about the dressing and have I been trained to use it?
Further information

Wounds Australia  www.woundsaustralia.com.au
International Wound Infection Institute  www.woundinfection-institute.com
National Institute for Health and Clinical Excellence (NICE)  http://www.nice.org.uk/
EWMA Consensus Documents  http://ewma.org/english/position-documents.html
Scottish Intercollegiate Guidelines Network (SIGN)  http://www.sign.ac.uk/
Wounds International  http://www.woundsinternational.com/clinical-guidelines
Registered Nurses Association of Ontario  http://www.rnao.org/
National Health Medical Research Council:
The Joanna Briggs Institute  http://joannabriggs.org/
Wounds UK  http://www.wounds-uk.com/
References


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